



Ernie Fletcher
Governor

CABINET FOR HEALTH AND FAMILY SERVICES
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Mark D. Birdwhistell
Secretary

Shannon R. Turner, JD
Commissioner

May 15, 2006

Dear Member:

As a Kentucky Medicaid member, it is important for you to be aware of upcoming changes to your benefits package. Governor Fletcher has introduced a new Medicaid plan called *KyHealth Choices* that will be implemented on May 15, 2006. *KyHealth Choices* will offer you benefits that are personalized to your specific needs and will allow you to be more involved in your own health care.

Your *KyHealth Choices* plan is Optimum Choices. The Optimum Choices plan includes basic medical services, including mental health services in inpatient and outpatient settings. You will need to pay a co-payment for some services and prescriptions; however, you will not need to begin paying these new amounts until **June 1, 2006**.

The most you will have to pay is \$225 for healthcare services per year and \$225 for prescriptions per year. Because *KyHealth Choices* won't be starting until June 1, the most you will have to pay this year is \$131.25 for healthcare services and \$131.25 for prescriptions. All of the co-payments that you pay count toward the maximum amounts. You will not receive a new Medicaid card. You may continue to use your current card.

Please see the attached sheet that describes your new health plan in more detail. If you currently receive services through the Supports for Community Living (SCL) waiver, you will continue to receive the same waiver services through that specific program, even though it is not listed here. The attachment only lists your medical services.

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If you do not want to be in Optimum Choices, you may opt-out and you will be placed into the Global Choices plan, but you will be required to pay higher co-payments. Please visit our website at www.chfs.ky.gov/dms/kyhealthchoices.htm to learn more about Optimum Choices. **If you have any questions about your plan, or if you wish to opt-out of Optimum Choices and be placed into Global Choices, you may call 1-800-635-2570.**

Important information for Kentucky Patient Access and Care (KenPAC) and Lock-In participants

If you are a member of the Kentucky Patient Access and Care (KenPAC) program, it is important for you to know the numbers to call or where to go when you have questions about your KenPAC services. Both of the numbers listed below are toll-free (you will not be charged to call these numbers) and are available from **8 a.m. to 6 p.m. (EDT) Monday through Friday.**

Call **1-800-635-2570** for questions about:

- Eligibility
- Coverage
- Card replacement

Call **1-877-298-6108** or contact your local Department for Community Based Services (DCBS) office for:

- Changes regarding your primary care physician (PCP)
- Questions regarding Lock-In

A listing of local community based services offices is available online at apps.chfs.ky.gov/office_phone/office_phone_list.asp.

I encourage you to use these services for any questions you have.

Sincerely,



Shannon R. Turner, J.D.
Commissioner

Enclosure